# 10/531145 JC12 Rec'd PCT/PTC 12 APR 2005

# Application Data Sheet APPLICATION INFORMATION

Application Number::

Filing Date::

**Application Type:**:

Regular

Subject Matter::

**Utility** 

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

None

Number of CD Disks:

Number of Copies of CDs::

Sequence Submission?::

Paper

Computer Readable From (CRF)?:: Yes

Number of Copies of CRF::

1

Title::

METHODS OF PREPARING LYMPHOCYTES THAT

EXPRESS INTERLEUKIN-2 AND THEIR USE IN THE

TREATMENT OF CANCER

Attorney Docket Number::

234872

Request for Early Publication?::

No

Request for Non-Publication?::

No

Suggested Drawing Figure::

**Total Drawing Sheets::** 

0

Small Entity?::

No

Latin Name::

Variety denomination name::

Petition Included?::

No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

APPLICANT INFORMATION

Initial 04/12/05

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Ke

Middle Name::

Family Name:: LIU

Name Suffix::

City of Residence:: Rockville

State or Prov. of Residence:: MD
Country of Residence:: US

Street of mailing address:: 14 Sweetwood Court

City of mailing address:: Rockville

State or Province of mailing address:: MD

Country of mailing address:: US

Postal or Zip Code of mailing address:: 20850

Inventor Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Steven

Middle Name:: A

Family Name:: ROSENBERG

Name Suffix::

City of Residence:: Potomac

State or Prov. of Residence:: MD
Country of Residence:: US

Street of mailing address:: 10104 Iron Gate Road

City of mailing address:: Potomac

State or Province of mailing address:: MD

Country of mailing address:: US

Postal or Zip Code of mailing address:: 20854

#### **CORRESPONDENCE INFORMATION**

Correspondence Customer Number:: 45733

Phone:: (312) 616-5600

Fax:: (312) 616-5700

E-mail Address:: mail@leydig.com

#### REPRESENTATIVE INFORMATION

Representative Customer Number 1:: 45733

Representative Designation:: Registration Number:: Representative Name::

# DOMESTIC PRIORITY INFORMATION

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

This Application National Stage of PCT/US2002/033243 10/15/02

# FOREIGN APPLICATION INFORMATION

Country:: Application Number:: Filing Date:: Priority Claimed

# **ASSIGNEE INFORMATION**

Assignee name:: Government of the United States of America, represented by

the Secretary Department of Health and Human Services

Street of mailing address:: Office of Technology Transfer

6011 Executive Boulevard, Suite 325

City of mailing address:: Rockville

State or Province of

mailing address:: MD

Country of mailing

address:: US

Postal or Zip Code of

mailing address:: 20852